

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

KINZLER FOR CONGRESS

ADDRESS (number and street)

929 N NEWTON AVE

Check if different
than previously
reported. (ACC)

GLEN ELLYN

IL

60137

2. FEC IDENTIFICATION NUMBER ▼

C

C00590166

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

IL

06

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the
State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer James T Bourg

Signature of Treasurer

James T Bourg

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

KINZLER FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	5

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	60292.00	60292.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	60292.00	60292.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	39390.41	39390.41
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	39390.41	39390.41
8. Cash on Hand at Close of Reporting Period (from Line 27).....	40901.59	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	20000.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 48

Write or Type Committee Name

KINZLER FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	5

I. RECEIPTS**COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

59695.00

59695.00

(ii) Unitemized.....

597.00

597.00

(iii) TOTAL of contributions from individuals ▶

60292.00

60292.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

60292.00

60292.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

20000.00

20000.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

20000.00

20000.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

80292.00

80292.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 48

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	39390.41	39390.41
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	39390.41	39390.41

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	80292.00
25. SUBTOTAL (add Line 23 and Line 24).....	80292.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	39390.41
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	40901.59

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: F3A
Transaction ID :

Amended to correct election year of B. Clark contribution from 2700 to 2016.

Form/Schedule:
Transaction ID:

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 48

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

KINZLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Dr. Stephen P Boghossian

Mailing Address 928 Waverly Rd

City

Glen Ellyn

State

IL

Zip Code

60137

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Physician

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		29		2015

Transaction ID : SA11AI.4148

Amount of Each Receipt this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

James T Bourg

Mailing Address 2372 Waterside Dr

City

Aurora

State

IL

Zip Code

60502-1383

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Accountant

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : SA11AI.4413

Amount of Each Receipt this Period

1200.00

☐ Memo Item

In-kind - Accounting services

Full Name (Last, First, Middle Initial)

Lea Casey

Mailing Address 42 Sawgrass Dr

City

Lemont

State

IL

Zip Code

60439

FEC ID number of contributing
federal political committee.

C

Name of Employer
Associated OrthodontistsOccupation
Administrative assistant

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2015

Transaction ID : SA11AI.4171

Amount of Each Receipt this Period

2700.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6600.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 48

☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
KINZLER FOR CONGRESS

A. Full Name (Last, First, Middle Initial) Dr. Michael V Casey			Date of Receipt M M / D D / Y Y Y Y Y 12 / 30 / 2015	
Mailing Address 42 Sawgrass Dr			Transaction ID : SA11AI.4167	
City Lemont	State IL	Zip Code 60439	Amount of Each Receipt this Period 5400.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item		
Name of Employer Self		Occupation Orthodontist		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5400.00		
B. Full Name (Last, First, Middle Initial) Dr. Michael V Casey			Date of Receipt M M / D D / Y Y Y Y Y 12 / 30 / 2015	
Mailing Address 42 Sawgrass Dr			Transaction ID : SA11AI.4341	
City Lemont	State IL	Zip Code 60439	Amount of Each Receipt this Period -2700.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Reattribute: To Paris Casey		
Name of Employer Self		Occupation Orthodontist		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2700.00		
C. Full Name (Last, First, Middle Initial) Natalie Casey			Date of Receipt M M / D D / Y Y Y Y Y 12 / 30 / 2015	
Mailing Address 2300 Walnut St Apt 466			Transaction ID : SA11AI.4175	
City Denver	State CO	Zip Code 80205	Amount of Each Receipt this Period 2700.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item		
Name of Employer Hitachi Corporation		Occupation Sales		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2700.00		
SUBTOTAL of Receipts This Page (optional).....			5400.00	
TOTAL This Period (last page this line number only).....			5400.00	

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 48

☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
KINZLER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Neal V Casey

Mailing Address 42 Sawgrass Dr

City Lemont State IL Zip Code 60439

FEC ID number of contributing federal political committee. **C**

Name of Employer Wirtz Beverage Occupation Sales

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 30 2015

Transaction ID : SA11AI.4173

Amount of Each Receipt this Period

2700.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Paris Casey

Mailing Address 42 Sawgrass Dr

City Lemont State IL Zip Code 60439

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 30 2015

Transaction ID : SA11AI.4342

Amount of Each Receipt this Period

2700.00

☐ Memo Item

Reattribute: From Michael Casey

C. Full Name (Last, First, Middle Initial)
Bonnie A Clarke

Mailing Address 934 Oakwood Ct

City Glen Ellyn State IL Zip Code 60137-6105

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 29 2015

Transaction ID : SA11AI.4160

Amount of Each Receipt this Period

2700.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

8100.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 48

☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
KINZLER FOR CONGRESS

A. Full Name (Last, First, Middle Initial) Dennis J Clarke		Date of Receipt M M / D D / Y Y Y Y Y 12 / 29 / 2015	
Mailing Address 934 Oakwood Ct		Transaction ID : SA11AI.4162	
City Glen Ellyn	State IL	Zip Code 60137-6105	Amount of Each Receipt this Period 2700.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer Self- Clarke Packing & Crating	Occupation Business Owner		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00		
B. Full Name (Last, First, Middle Initial) Dr. Michael L Cohan		Date of Receipt M M / D D / Y Y Y Y Y 12 / 02 / 2015	
Mailing Address 1133 W Cornelia Ave Unit 1		Transaction ID : SA11AI.4118	
City Chicago	State IL	Zip Code 60657	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer Elmhurst Clinic	Occupation Physician		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		
C. Full Name (Last, First, Middle Initial) Mary Jacqueline DeThorne		Date of Receipt M M / D D / Y Y Y Y Y 11 / 30 / 2015	
Mailing Address 11064 Eaton Ct		Transaction ID : SA11AI.4114	
City Westchester	State IL	Zip Code 60154	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer Retired	Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
SUBTOTAL of Receipts This Page (optional).....		3450.00	
TOTAL This Period (last page this line number only).....			

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 48

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

KINZLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Raymond Diletti

Mailing Address 875 E 22nd St

Apt 408

City

Lombard

State

IL

Zip Code

60148-5026

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		14		2015

Transaction ID : SA11AI.4122

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Michael Fazzari

Mailing Address 21509 Papoose Lake Dr

City

Crest Hill

State

IL

Zip Code

60403

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fazzari Tile & Remodeling

Occupation

Contractor

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : SA11AI.4463

Amount of Each Receipt this Period

2700.00

☐ Memo Item

In-kind - Campaign office improvements

Full Name (Last, First, Middle Initial)

C. Stephen Garrett

Mailing Address 1405 W Fillmore St

City

Chicago

State

IL

Zip Code

60607

FEC ID number of contributing
federal political committee.

C

Name of Employer

Garrett Photo Graphic

Occupation

Photographer and videographer

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : SA11AI.4466

Amount of Each Receipt this Period

1500.00

☐ Memo Item

In-kind - Video and still photography

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4450.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 48

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

KINZLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Dr. James H Griffin

Mailing Address 745 Fletcher Dr

City

Elgin

State

IL

Zip Code

60123

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self - Urology Ltd

Occupation

Physician

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : SA11AI.4157

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Dr. Ryon Hennessy

Mailing Address 207 Wood Glen Lane

City

Oak Brook

State

IL

Zip Code

60523

FEC ID number of contributing
federal political committee.

C

Name of Employer

Orthopedic Specialists, SC

Occupation

Orthopedic Surgeon

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : SA11AI.4180

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Dr. David Hodgett

Mailing Address 3N481 Shagbark Dr

City

West Chicago

State

IL

Zip Code

60185

FEC ID number of contributing
federal political committee.

C

Name of Employer

David Hodgett, MD, PC

Occupation

Surgeon

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		27		2015

Transaction ID : SA11AI.4152

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1750.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 48

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

KINZLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Dr. Donald Jones

Mailing Address 10499 Fleetwood St

City

Huntley

State

IL

Zip Code

60142

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Dentist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : SA11AI.4178

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Daniel J Kinzler

Mailing Address 1039 W Altgeld St

City

Chicago

State

IL

Zip Code

60614-2208

FEC ID number of contributing
federal political committee.

C

Name of Employer
Deloitte ConsultingOccupation
Consultant

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		05		2015

Transaction ID : SA11AI.4334

Amount of Each Receipt this Period

2700.00

☐ Memo Item

Reattribute: From Melissa A. Kinzler

Full Name (Last, First, Middle Initial)

Dr. Gordon James Kinzler

Mailing Address 929 N Newton Ave

City

Glen Ellyn

State

IL

Zip Code

60137

FEC ID number of contributing
federal political committee.

C H6IL06158

Name of Employer
SelfOccupation
Physician

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1010.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
11		10		2015

Transaction ID : SA11AI.4104

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3210.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 13 OF 48

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

KINZLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Dr. Gordon James Kinzler

Mailing Address 929 N Newton Ave

City

Glen Ellyn

State

IL

Zip Code

60137

FEC ID number of contributing
federal political committee.

C H6IL06158

Name of Employer
SelfOccupation
Physician

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1020.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		10		2015

Transaction ID : SA11AI.4105

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Gordon L Kinzler

Mailing Address 617 Campbell St

City

Joliet

State

IL

Zip Code

60435

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2015

Transaction ID : SA11AI.4136

Amount of Each Receipt this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Jeffrey J Kinzler

Mailing Address 4724 41st St

City

Kenosha

State

WI

Zip Code

53144

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Financial Advisor

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		26		2015

Transaction ID : SA11AI.4142

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

3710.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 48

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

KINZLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mary C Kinzler

Mailing Address 617 Campbell St

City

Joliet

State

IL

Zip Code

60435

FEC ID number of contributing
federal political committee.

C

Name of Employer
Gordon J Kinzler, MDOccupation
Billing Specialist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2015

Transaction ID : SA11AI.4138

Amount of Each Receipt this Period

2200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Mary C Kinzler

Mailing Address 617 Campbell St

City

Joliet

State

IL

Zip Code

60435

FEC ID number of contributing
federal political committee.

C

Name of Employer
Gordon J Kinzler, MDOccupation
Billing Specialist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : SA11AI.4468

Amount of Each Receipt this Period

500.00

☐ Memo Item

In-kind - Database management

Full Name (Last, First, Middle Initial)

Melissa A Kinzler

Mailing Address 1039 W Altgeld St

City

Chicago

State

IL

Zip Code

60614-2208

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cristo Rey NetworkOccupation
Finance Professional

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		05		2015

Transaction ID : SA11AI.4110

Amount of Each Receipt this Period

5400.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

8100.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 15 OF 48

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

KINZLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Melissa A Kinzler

A.

Mailing Address 1039 W Altgeld St

City

Chicago

State

IL

Zip Code

60614-2208

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cristo Rey Network

Occupation

Finance Professional

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		05		2015

Transaction ID : SA11AI.4333

Amount of Each Receipt this Period

-2700.00

☐ Memo Item

Reattribute: To Daniel J. Kinzler

Full Name (Last, First, Middle Initial)

Thomas J Kinzler

B.

Mailing Address 3829 Harvest Lane

City

Glenview

State

IL

Zip Code

60026

FEC ID number of contributing
federal political committee.

C

Name of Employer

PricewaterhouseCoopers

Occupation

Tax attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : SA11AI.4182

Amount of Each Receipt this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Dr. William J Kinzler

C.

Mailing Address 1113 2nd Ave South

City

Tierra Verde

State

FL

Zip Code

33715-2251

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Dentist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		10		2015

Transaction ID : SA11AI.4100

Amount of Each Receipt this Period

2700.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2700.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 16 OF 48

☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
KINZLER FOR CONGRESS

A. Full Name (Last, First, Middle Initial) Dr. Daniel McGuire			Date of Receipt M M / D D / Y Y Y Y 12 / 30 / 2015	
Mailing Address 217 Meadow Wood Dr			Transaction ID : SA11AI.4140	
City	State	Zip Code		
Joliet	IL	60431		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 250.00	
Name of Employer Self		Occupation Dentist	<input type="checkbox"/> Memo Item	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		
B. Full Name (Last, First, Middle Initial) Dr. Brian Moran			Date of Receipt M M / D D / Y Y Y Y 12 / 27 / 2015	
Mailing Address 604 East First St			Transaction ID : SA11AI.4150	
City	State	Zip Code		
Hinsdale	IL	60521		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 500.00	
Name of Employer Self		Occupation Physician	<input type="checkbox"/> Memo Item	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		
C. Full Name (Last, First, Middle Initial) Gene Morey			Date of Receipt M M / D D / Y Y Y Y 12 / 28 / 2015	
Mailing Address 3625 S Cass Ct #618			Transaction ID : SA11AI.4134	
City	State	Zip Code		
Oak Brook	IL	60523		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 1000.00	
Name of Employer Retired		Occupation Retired	<input type="checkbox"/> Memo Item	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00		
SUBTOTAL of Receipts This Page (optional).....			1750.00	
TOTAL This Period (last page this line number only).....				

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 17 OF 48

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

KINZLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Derke J Price Esq.

Mailing Address 140 South Dearborn St

City

Chicago

State

IL

Zip Code

60603

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ancel, Glink, Diamond, Bush, D

Occupation

Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

625.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		31		2015

Transaction ID : SA11AI.4461

Amount of Each Receipt this Period

625.00

☐ Memo Item

In-kind - Legal services

Full Name (Last, First, Middle Initial)

Judith Rehkow

Mailing Address 21553 N 77th PI

City

Scottsdale

State

AZ

Zip Code

85255

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		17		2015

Transaction ID : SA11AI.4338

Amount of Each Receipt this Period

2700.00

☐ Memo Item

Reattribute: From William Rehkow

Full Name (Last, First, Middle Initial)

William Rehkow

Mailing Address 21553 N 77th PI

City

Scottsdale

State

AZ

Zip Code

85255

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		17		2015

Transaction ID : SA11AI.4130

Amount of Each Receipt this Period

5400.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

8725.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 18 OF 48

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

KINZLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

William Rehkow**A.**

Mailing Address 21553 N 77th Pl

City

Scottsdale

State

AZ

Zip Code

85255

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		17		2015

Transaction ID : SA11AI.4337

Amount of Each Receipt this Period

-2700.00

☐ Memo Item

Reattribute: To Judith Rehkow

Full Name (Last, First, Middle Initial)

Mark Sawko**B.**Mailing Address 1 Bloomingdale Place
Unit 704

City

Bloomingdale

State

IL

Zip Code

60108

FEC ID number of contributing
federal political committee.

C

Name of Employer

R C Coil Spring Mfg Co, Inc

Occupation

Vice President

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		17		2015

Transaction ID : SA11AI.4128

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Raj P Thakral**C.**Mailing Address 801 N Cass Ave
Suite 204

City

Westmont

State

IL

Zip Code

60559

FEC ID number of contributing
federal political committee.

C

Name of Employer

Smart Millennium Solutions

Occupation

Accountant and consultant

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		31		2015

Transaction ID : SA11AI.4470

Amount of Each Receipt this Period

2200.00

☐ Memo Item

In-kind - Accounting and consulting services for filings

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

-250.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 48

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

KINZLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Dr. Richard A Valadez

Mailing Address 2301 Vista Close

City

Rockford

State

IL

Zip Code

61107-1036

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Physician

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2015

Transaction ID : SA11Al.4145

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2000.00

59695.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 48

<input type="checkbox"/> 11a 12	<input checked="" type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	--	-------------------------------------	------------------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
KINZLER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Dr. Gordon James Kinzler

Mailing Address 929 N Newton Ave

City State Zip Code
Glen Ellyn IL 60137

FEC ID number of contributing federal political committee. **C** H6IL06158

Name of Employer Self Occupation Physician

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	13	2015

Transaction ID : SA13A.4224

Amount of Each Receipt this Period

1000.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Dr. Gordon James Kinzler

Mailing Address 929 N Newton Ave

City State Zip Code
Glen Ellyn IL 60137

FEC ID number of contributing federal political committee. **C** H6IL06158

Name of Employer Self Occupation Physician

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
10720.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	12	2015

Transaction ID : SA13A.4268

Amount of Each Receipt this Period

9700.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Dr. Gordon James Kinzler

Mailing Address 929 N Newton Ave

City State Zip Code
Glen Ellyn IL 60137

FEC ID number of contributing federal political committee. **C** H6IL06158

Name of Employer Self Occupation Physician

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
11020.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	12	2015

Transaction ID : SA13A.4271

Amount of Each Receipt this Period

300.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

11000.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A-N5HCB
.

Form/Schedule: SA13A
Transaction ID : SA13A.4224

(Current loan amount of 1000.00 from a balance of 1000.00 has been forgiven)

Form/Schedule: SA13A
Transaction ID: SA13A.4268

(Current loan amount of 9700.00 from a balance of 9700.00 has been forgiven)

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB
.

Form/Schedule: SA13A
Transaction ID : SA13A.4271

(Current loan amount of 300.00 from a balance of 300.00 has been forgiven)

Form/Schedule:
Transaction ID:

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 48

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
KINZLER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Dr. Gordon James Kinzler

Mailing Address 929 N Newton Ave

City State Zip Code
Glen Ellyn IL 60137

FEC ID number of contributing federal political committee. **C** H6IL06158

Name of Employer Self Occupation Physician

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
15520.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		02		2015

Transaction ID : SA13A.4269

Amount of Each Receipt this Period

4500.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Dr. Gordon James Kinzler

Mailing Address 929 N Newton Ave

City State Zip Code
Glen Ellyn IL 60137

FEC ID number of contributing federal political committee. **C** H6IL06158

Name of Employer Self Occupation Physician

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
20020.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		16		2015

Transaction ID : SA13A.4270

Amount of Each Receipt this Period

4500.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

9000.00
20000.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SA13A
Transaction ID : SA13A.4269

(Current loan amount of 4500.00 from a balance of 4500.00 has been forgiven)

Form/Schedule: SA13A
Transaction ID: SA13A.4270

(Current loan amount of 4500.00 from a balance of 4500.00 has been forgiven)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 OF 48

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

KINZLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Blue Sky Marketing GroupMailing Address 633 Skokie Blvd
Suite 100

City Northbrook State IL Zip Code 60062

Purpose of Disbursement
Printed campaign materials

006

Category/
Type

Candidate Name

KINZLER FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: IL District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		21		2015

Amount of Each Disbursement this Period

635.78

☐ Memo Item

Transaction ID : SB17.4376

B. James T Bourg

Mailing Address 2372 Waterside Dr

City Aurora State IL Zip Code 60502-1383

Purpose of Disbursement
In-kind - Accounting servicesCategory/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2015

Amount of Each Disbursement this Period

1200.00

☐ Memo Item

Transaction ID : SB17.4414

c. Chase Card Services

Mailing Address PO Box 94014

City Palatine State IL Zip Code 60094-4014

Purpose of Disbursement
Monthly charges -see transaction split

001

Category/
Type

Candidate Name

KINZLER FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: IL District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		11		2015

Amount of Each Disbursement this Period

1381.98

☐ Memo Item

Transaction ID : SB17.4385

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3217.98

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 26 OF 48

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

KINZLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FastSigns of Wheaton, IL

Mailing Address 318 E Geneva Rd

City	State	Zip Code
Wheaton	IL	60187

Purpose of Disbursement
Banner

004

Candidate Name

KINZLER FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: IL District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		25		2015

Amount of Each Disbursement this Period

134.38

☒ Memo Item

Transaction ID : SB17.4385.1

B. Blue Sky Marketing GroupMailing Address 633 Skokie Blvd
Suite 100

City	State	Zip Code
Northbrook	IL	60062

Purpose of Disbursement
Campaign T-shirts

004

Candidate Name

KINZLER FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: IL District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		30		2015

Amount of Each Disbursement this Period

818.03

☒ Memo Item

Transaction ID : SB17.4385.3

c. GotPrint.com

Mailing Address 7651 N San Fernando Rd

City	State	Zip Code
Burbank	CA	91505

Purpose of Disbursement
Campaign brochure printing

006

Candidate Name

KINZLER FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: IL District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		28		2015

Amount of Each Disbursement this Period

258.00

☒ Memo Item

Transaction ID : SB17.4385.4

SUBTOTAL of Disbursements This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 48

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

KINZLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Michael Fazzari

Mailing Address 21509 Papoose Lake Dr

City	State	Zip Code
Crest Hill	IL	60403

Purpose of Disbursement
In-kind - Campaign office improvements

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2015

Amount of Each Disbursement this Period

2700.00

☐ Memo Item

Transaction ID : SB17.4464

B. Fazzari Tile & RemodelingMailing Address 646 Roosevelt Rd
Suite D

City	State	Zip Code
Glen Ellyn	IL	60137

Purpose of Disbursement
Deposit for remodeling of campaign office space

Candidate Name

KINZLER FOR CONGRESS

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: IL District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		07		2015

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Transaction ID : SB17.4368

c. Fazzari Tile & RemodelingMailing Address 646 Roosevelt Rd
Suite D

City	State	Zip Code
Glen Ellyn	IL	60137

Purpose of Disbursement
Remodeling of campaign office space

Candidate Name

KINZLER FOR CONGRESS

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: IL District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		18		2015

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Transaction ID : SB17.4372

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5700.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 28 OF 48

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

KINZLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Fazzari Tile & RemodelingMailing Address 646 Roosevelt Rd
Suite DCity State Zip Code
Glen Ellyn IL 60137Purpose of Disbursement
Remodeling of campaign office space

Candidate Name

KINZLER FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: IL District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		23		2015

Amount of Each Disbursement this Period

700.00

☐ Memo Item

Transaction ID : SB17.4380

B. Evan Garrett

Mailing Address 930 N Newton Ave

City State Zip Code
Glen Ellyn IL 60137Purpose of Disbursement
Video services

Candidate Name

KINZLER FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: IL District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		11		2015

Amount of Each Disbursement this Period

170.00

☐ Memo Item

Transaction ID : SB17.4275

c. Stephen Garrett

Mailing Address 1405 W Fillmore St

City State Zip Code
Chicago IL 60607Purpose of Disbursement
In-kind - Video and still photography

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2015

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Transaction ID : SB17.4467

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2370.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 29 OF 48

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

KINZLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Internal Revenue Service

Mailing Address PO Box 804521

City	State	Zip Code
Cincinnati	OH	45280-4521

Purpose of Disbursement
Federal payroll taxes

004

Candidate Name

KINZLER FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: IL District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	8		2	0	1	5

Amount of Each Disbursement this Period

172.88

☐ Memo Item

Transaction ID : SB17.4349

B. Internal Revenue Service

Mailing Address PO Box 804521

City	State	Zip Code
Cincinnati	OH	45280-4521

Purpose of Disbursement
Federal payroll taxes

004

Candidate Name

KINZLER FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: IL District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	9		2	0	1	5

Amount of Each Disbursement this Period

167.04

☐ Memo Item

Transaction ID : SB17.4363

c. Kelli D Keyzers

Mailing Address 638 Oleson Dr

City	State	Zip Code
Naperville	IL	60540

Purpose of Disbursement
Social media management

004

Candidate Name

KINZLER FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: IL District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	1	5

Amount of Each Disbursement this Period

736.25

☐ Memo Item

Transaction ID : SB17.4279

SUBTOTAL of Disbursements This Page (optional).....

1076.17

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 30 OF 48

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

KINZLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Kelli D Keyzers

Mailing Address 638 Oleson Dr

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		01		2015

City	State	Zip Code
Naperville	IL	60540

Amount of Each Disbursement this Period

716.10

Purpose of Disbursement
Social media management

004

☐ Memo Item

Candidate Name

KINZLER FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: IL District: 06

Transaction ID : SB17.4361

Full Name (Last, First, Middle Initial)

B. KGA Garrett Associates

Mailing Address 1366 W Lake St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		16		2015

City	State	Zip Code
Chicago	IL	60607

Amount of Each Disbursement this Period

440.84

Purpose of Disbursement
Domain, email, website hosting, search engine visibility, registration

004

☐ Memo Item

Candidate Name

KINZLER FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: IL District: 06

Transaction ID : SB17.4348

Full Name (Last, First, Middle Initial)

c. KGA Garrett Associates

Mailing Address 1366 W Lake St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		25		2015

City	State	Zip Code
Chicago	IL	60607

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
Web design, branding, handouts

004

☐ Memo Item

Candidate Name

KINZLER FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: IL District: 06

Transaction ID : SB17.4359

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

6156.94

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 31 OF 48

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

KINZLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Mary C Kinzler

Mailing Address 617 Campbell St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2015

City	State	Zip Code
Joliet	IL	60435

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
In-kind - Database management

Candidate Name

Category/
Type☐ Memo Item

Transaction ID : SB17.4469

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

B. Chris P Mueller

Mailing Address 1590 Holland Sylvania

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		30		2015

City	State	Zip Code
Toledo	OH	43616

Amount of Each Disbursement this Period

1500.00

Purpose of Disbursement
Campaign management - December

Candidate Name

KINZLER FOR CONGRESSCategory/
Type☐ Memo Item

Transaction ID : SB17.4383

Office Sought:	<input checked="" type="checkbox"/> House	Disbursement For: 2016
	Senate	
	President	
	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: IL District: 06

Full Name (Last, First, Middle Initial)

c. Chris P Mueller

Mailing Address 1590 Holland Sylvania

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		02		2015

City	State	Zip Code
Toledo	OH	43616

Amount of Each Disbursement this Period

3500.00

Purpose of Disbursement
Campaign management fee - December

Candidate Name

KINZLER FOR CONGRESSCategory/
Type☐ Memo Item

Transaction ID : SB17.4365

Office Sought:	<input checked="" type="checkbox"/> House	Disbursement For: 2016
	Senate	
	President	
	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: IL District: 06

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5500.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 32 OF 48

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

KINZLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Chris P Mueller

Mailing Address 1590 Holland Sylvania

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		22		2015

City	State	Zip Code
Toledo	OH	43616

Amount of Each Disbursement this Period

250.00

Purpose of Disbursement
Christmas travel to return home

002

☐ Memo Item

Transaction ID : SB17.4377

Candidate Name

KINZLER FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: IL District: 06

Full Name (Last, First, Middle Initial)

B. Chris P Mueller

Mailing Address 1590 Holland Sylvania

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2015

City	State	Zip Code
Toledo	OH	43616

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Campaign management fee - January

001

☐ Memo Item

Transaction ID : SB17.4382

Candidate Name

KINZLER FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: IL District: 06

Full Name (Last, First, Middle Initial)

c. PayPal Inc

Mailing Address 2211 N First St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		26		2015

City	State	Zip Code
San Jose	CA	95131

Amount of Each Disbursement this Period

29.30

Purpose of Disbursement
Fee - Kinzler

003

☐ Memo Item

Transaction ID : SB17.4237

Candidate Name

KINZLER FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: IL District: 06

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2779.30

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 33 OF 48

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

KINZLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. PayPal Inc

Mailing Address 2211 N First St

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
Fee - Moran

003

Candidate Name

KINZLER FOR CONGRESSCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: IL District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		27		2015

Amount of Each Disbursement this Period

14.80

☐ Memo Item

Transaction ID : SB17.4238

B. PayPal Inc

Mailing Address 2211 N First St

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
Fee - Hodgett

003

Candidate Name

KINZLER FOR CONGRESSCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: IL District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		27		2015

Amount of Each Disbursement this Period

7.55

☐ Memo Item

Transaction ID : SB17.4239

c. PayPal Inc

Mailing Address 2211 N First St

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
Fee - Stavropolulos

003

Candidate Name

KINZLER FOR CONGRESSCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: IL District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		30		2015

Amount of Each Disbursement this Period

3.20

☐ Memo Item

Transaction ID : SB17.4240

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

25.55

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 34 OF 48

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

KINZLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. PayPal Inc

Mailing Address 2211 N First St

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
Fee - Casey

003

Candidate Name

KINZLER FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: IL District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		30		2015

Amount of Each Disbursement this Period

156.90

☐ Memo Item

Transaction ID : SB17.4241

B. PayPal Inc

Mailing Address 2211 N First St

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
Fee - Casey

003

Candidate Name

KINZLER FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: IL District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		30		2015

Amount of Each Disbursement this Period

78.60

☐ Memo Item

Transaction ID : SB17.4242

c. PayPal Inc

Mailing Address 2211 N First St

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
Fee - Casey

003

Candidate Name

KINZLER FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: IL District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		30		2015

Amount of Each Disbursement this Period

78.60

☐ Memo Item

Transaction ID : SB17.4243

SUBTOTAL of Disbursements This Page (optional).....

314.10

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 35 OF 48

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

KINZLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. PayPal Inc

Mailing Address 2211 N First St

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
Fee - Casey

003

Candidate Name

KINZLER FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: IL District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		30		2015

Amount of Each Disbursement this Period

78.60

☐ Memo Item

Transaction ID : SB17.4244

B. PayPal Inc

Mailing Address 2211 N First St

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
Fee - Folke

003

Candidate Name

KINZLER FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: IL District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2015

Amount of Each Disbursement this Period

3.20

☐ Memo Item

Transaction ID : SB17.4245

c. PayPal Inc

Mailing Address 2211 N First St

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
Fee - Jones

003

Candidate Name

KINZLER FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: IL District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2015

Amount of Each Disbursement this Period

14.80

☐ Memo Item

Transaction ID : SB17.4246

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

96.80

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 36 OF 48

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

KINZLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. PayPal Inc

Mailing Address 2211 N First St

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
Fee - Hennessy

003

Candidate Name

KINZLER FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: IL District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2015

Amount of Each Disbursement this Period

14.80

☐ Memo Item

Transaction ID : SB17.4247

B. PayPal Inc

Mailing Address 2211 N First St

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
Fee - Kinzler

003

Candidate Name

KINZLER FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: IL District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2015

Amount of Each Disbursement this Period

78.60

☐ Memo Item

Transaction ID : SB17.4248

c. Positively Naperville, LLCMailing Address 931 W 75th St
Suite #137/219

City	State	Zip Code
Naperville	IL	60565

Purpose of Disbursement
Campaign website design and maintenance

004

Candidate Name

KINZLER FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: IL District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		13		2015

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Transaction ID : SB17.4277

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1593.40

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 37 OF 48

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

KINZLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Positively Naperville, LLCMailing Address 931 W 75th St
Suite #137/219

City Naperville State IL Zip Code 60565

Purpose of Disbursement
Campaign website design and maintenance

Candidate Name

KINZLER FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: IL District: 06

Date of Disbursement

M M	D D	Y Y Y Y
11	25	2015

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Transaction ID : SB17.4354

B. Derke J Price Esq.

Mailing Address 140 South Dearborn St

City Chicago State IL Zip Code 60603

Purpose of Disbursement
In-kind - Legal services

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
12	31	2015

Amount of Each Disbursement this Period

625.00

☐ Memo Item

Transaction ID : SB17.4462

c. Heyward D Smith

Mailing Address 211 Talahi Rd SE

City Vienna State VA Zip Code 22180

Purpose of Disbursement
Contract fundraising Dec-Jan

Candidate Name

KINZLER FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: IL District: 06

Date of Disbursement

M M	D D	Y Y Y Y
12	21	2015

Amount of Each Disbursement this Period

4000.00

☐ Memo Item

Transaction ID : SB17.4374

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5625.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 38 OF 48

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

KINZLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Raj P ThakralMailing Address 801 N Cass Ave
Suite 204City State Zip Code
Westmont IL 60559Purpose of Disbursement
In-kind - Accounting and consulting services for filings

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2015

Amount of Each Disbursement this Period

2200.00

☐ Memo Item

Transaction ID : SB17.4472

B. Zachary Werrell

Mailing Address 5304 Singletree Ct

City State Zip Code
Glen Allen VA 23060Purpose of Disbursement
Campaign management consulting - December

Candidate Name

KINZLER FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: IL

District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		11		2015

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Transaction ID : SB17.4370

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

Amount of Each Disbursement this Period

--

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4200.00

38654.82

SCHEDULE C (FEC Form 3)
LOANS

PAGE 39 OF 48

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4224

KINZLER FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

Dr. Gordon James Kinzler

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
929 N Newton Ave

City	State	ZIP Code
Glen Ellyn	IL	60137

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
<input type="text" value="1000.00"/>	<input type="text" value="0.00"/>	<input type="text" value="1000.00"/>

TERMS

Date Incurred

 / /

Date Due

 / /

Interest Rate

 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text" value=""/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text" value=""/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text" value=""/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text" value=""/>

SUBTOTALS This Period This Page (optional)..... ►**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SC/10

Transaction ID : SC/10.4224

(Current loan amount of 1000.00 from a balance of 1000.00 has been forgiven)

Form/Schedule:

Transaction ID:

SCHEDULE C (FEC Form 3)
LOANS

PAGE 41 OF 48

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4268

KINZLER FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

Dr. Gordon James Kinzler

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
929 N Newton Ave

City	State	ZIP Code
Glen Ellyn	IL	60137

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
9700.00	0.00	9700.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
11 / 12 / 2015

Date Due

M M / D D / Y Y Y Y
/ / 12/31/16

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)..... ►

9700.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SC/10

Transaction ID : SC/10.4268

(Current loan amount of 9700.00 from a balance of 9700.00 has been forgiven)

Form/Schedule:

Transaction ID:

SCHEDULE C (FEC Form 3)
LOANS

PAGE 43 OF 48

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4271

KINZLER FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

Dr. Gordon James Kinzler

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
929 N Newton Ave

City	State	ZIP Code
Glen Ellyn	IL	60137

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
<input type="text" value="300.00"/>	<input type="text" value="0.00"/>	<input type="text" value="300.00"/>

TERMS

Date Incurred

 / /

Date Due

 / /

Interest Rate

 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)..... ►**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SC/10

Transaction ID : SC/10.4271

(Current loan amount of 300.00 from a balance of 300.00 has been forgiven)

Form/Schedule:

Transaction ID:

SCHEDULE C (FEC Form 3)
LOANS

PAGE 45 OF 48

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4269

KINZLER FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

Dr. Gordon James Kinzler

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
929 N Newton Ave

City	State	ZIP Code
Glen Ellyn	IL	60137

Original Amount of Loan

4500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

4500.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
12 / 02 / 2015

Date Due

M M / D D / Y Y Y Y
12/31/16

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

4500.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SC/10

Transaction ID : SC/10.4269

(Current loan amount of 4500.00 from a balance of 4500.00 has been forgiven)

Form/Schedule:

Transaction ID:

SCHEDULE C (FEC Form 3)
LOANS

PAGE 47 OF 48

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4270

KINZLER FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

Dr. Gordon James Kinzler

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
929 N Newton AveCity State ZIP Code
Glen Ellyn IL 60137

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
4500.00	0.00	4500.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
12 16 / 2015

Date Due

M M / D D / Y Y Y Y
12/31/16

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)..... ►

4500.00

TOTALS This Period (last page in this line only)..... ►

20000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SC/10

Transaction ID : SC/10.4270

(Current loan amount of 4500.00 from a balance of 4500.00 has been forgiven)

Form/Schedule:

Transaction ID: